FORM PFS PERSONAL FINANCIAL STATEMENT **COVER SHEET** PAGE 1 PAGE# Filed in accordance with chapter 572 of the Government Code. 19 For filings required in 2019, covering calendar year ending December 31, 2018. ACCOUNT # Use FORM PFS--INSTRUCTION GUIDE when completing this form. 00067897 1 NAME TITLE; FIRST; MI **OFFICE USE ONLY** Mr. Alejandro **ELECTRONICALLY FILED** NICKNAME; LAST; SUFFIX 04/29/2019 Dominguez ADDRESS / PO BOX; 2 ADDRESS APT / SUITE #; CITY; STATE; ZIP Receipt # HD / PM Amount Date Processed (CHECK IF FILER'S HOME ADDRESS) **TELEPHONE** AREA CODE PHONE NUMBER; EXTENSION Date Imaged NUMBER REASON FOR FILIING STATEMENT CANDIDATE _____ (INDICATE OFFICE) ELECTED OFFICER State Representative (INDICATE OFFICE) APPOINTED OFFICER ______ (INDICATE AGENCY) EXECUTIVE HEAD _____ (INDICATE AGENCY) FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT STATE PARTY CHAIR ______ (INDICATE PARTY) OTHER _____ (INDICATE POSITION) **5** Family members whose financial activity you are reporting (see instructions). Jill Koehler Dominguez **DEPENDENT CHILD** In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

SOURCES OF OCCUPATIONAL INCOME PART 1A If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD ___ 2 EMPLOYMENT NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER X (Check if Filer's Home Address) **EMPLOYER** Law Offices of Alejandro Dominguez ADDRESS / PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE **POSITION HELD** Attorney/Owner NATURE OF OCCUPATION SELF-EMPLOYED INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD _ **EMPLOYMENT** NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER Cameron County** ADDRESS / PO BOX; ZIP CODE APT / SUITE #; CITY; STATE: 1100 E. Monroe St Brownsville, TX 78520 POSITION HELD **County Commissioner** NATURE OF OCCUPATION SELF-EMPLOYED INFORMATION RELATES TO FILER X SPOUSE DEPENDENT CHILD __ **EMPLOYMENT** NAME AND ADDRESS OF EMPLOYER / POSITION HELD (Check if Filer's Home Address) X EMPLOYED BY ANOTHER **EMPLOYER IDEA Public Schools** ADDRESS / PO BOX; ZIP CODE APT / SUITE #; CITY; STATE; 1224 W. Pike Blvd Weslaco, TX 78596 POSITION HELD **Executive Director** NATURE OF OCCUPATION SELF-EMPLOYED

STOCK PART 2

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 BUSINESS ENTITY					
ACQUIRED BY X FILER	1 BUSINESS ENTITY	Apple Inc	1	NAME	
LESS THAN 100 X 100 TO 499 500 TO 999 1,000 TO 4,999		X FILER	SPOUSE	DEPENDENT CHILD)
LESS THAN \$5,000	3 NUMBER OF SHARES	<u> </u>	_	☐ 500 TO 999	1,000 TO 4,999
Citigroup Inc STOCK HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD		LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
ACQUIRED BY X FILER	BUSINESS ENTITY	Citigroup Inc	ı	NAME	
X LESS THAN 100		X FILER	SPOUSE	DEPENDENT CHILD	·
BUSINESS ENTITY RAME BUSINESS ENTITY RAME STOCK HELD OR ACQUIRED BY NUMBER OF SHARES BUSINESS ENTITY NAME STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY NAME RESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000-OR MORE DEPENDENT CHILD 1,000 TO 4,999 \$10,000 OR MORE BUSINESS ENTITY NAME Transcocean Ltd Zug Namen AKT STOCK HELD OR ACQUIRED BY NUMBER OF SHARES SPOUSE DEPENDENT CHILD NAME NAME	NUMBER OF SHARES	<u> </u>		☐ 500 TO 999	1,000 TO 4,999
Gamestop Class A STOCK HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD		LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
STOCK HELD OR ACQUIRED BY X FILER	BUSINESS ENTITY			NAME	
ACQUIRED BY X FILER		Gamestop Class A			
X LESS THAN 100		X FILER	SPOUSE	DEPENDENT CHILD)
BUSINESS ENTITY Transcocean Ltd Zug Namen AKT STOCK HELD OR ACQUIRED BY NUMBER OF SHARES LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE NAME Transcocean Ltd Zug Namen AKT	NUMBER OF SHARES	<u> </u>		500 TO 999	1,000 TO 4,999
Transcocean Ltd Zug Namen AKT STOCK HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD NUMBER OF SHARES	l ⊟''' ॐ'''' l	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD NUMBER OF SHARES	BUSINESS ENTITY	Transcocean Ltd Zug I		NAME	
NUMBER OF SHARES VIESS THAN 100 TO 400 TO 400 TO 4000 TO 4000		X FILER	SPOUSE	DEPENDENT CHILD)
LESS THAN 10K 10,000 OR MORE	NUMBER OF SHARES	X LESS THAN 100 LESS THAN 10K	100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
IF SOLD □ NET GAIN □ NET LOSS □ LESS THAN \$5,000 □ \$5,000 - \$9,999 □ \$10,000 - \$24,999 □ \$25,000OR MORE	IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE

STOCK PART 2

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 BUSINESS ENTITY	Goldman Sachs	١	IAME	
2 STOCK HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
3 NUMBER OF SHARES	X LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
4 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	Overstock Com Inc De		IAME	
STOCK HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
NUMBER OF SHARES	X LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	Apple Inc	١	IAME	
STOCK HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	
NUMBER OF SHARES	X LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	Transocean LTD	١	IAME	
STOCK HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	
NUMBER OF SHARES	X LESS THAN 100 LESS THAN 10K	100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE

STOCK PART 2

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

1	BUSINESS ENTITY	Verizon Comm Inc	^	NAME	
2	STOCK HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
3	NUMBER OF SHARES	LESS THAN 100	X 100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	BUSINESS ENTITY	FMC Corp	١	NAME	
	STOCK HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
	NUMBER OF SHARES	X LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	BUSINESS ENTITY	Hanwa Q Cells	١	NAME	
	STOCK HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
	NUMBER OF SHARES	X LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	BUSINESS ENTITY	Tesla	١	NAME	
	STOCK HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD)
	NUMBER OF SHARES	X LESS THAN 100 LESS THAN 10K	100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
			·	-	

BONDS, NOTES & OTHER COMMERCIAL PAPER PART 3 If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. List all bonds, notes, and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. **DESCRIPTION OF US Savings Bonds INSTRUMENT** HELD OR X SPOUSE **ACQUIRED BY** FILER DEPENDENT CHILD IF SOLD ☐ NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NET LOSS

MUTUAL FUNDS PART 4

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

MUTUAL FUND						
HELD OR ACQUIRED BY X FILER	1	MUTUAL FUND	Price T Rowe Growth		NAME	
MUTUAL FUND	2		X FILER	SPOUSE	DEPENDENT CHILD)
NETLOSS	3				500 TO 999	1,000 TO 4,999
AXA Aggressive Allocation SHARES OF MUTUAL FUND	4		LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
NUMBER OF SHARES OF		MUTUAL FUND	AXA Aggressive Alloca		NAME	
MUTUAL FUND			X FILER	SPOUSE	DEPENDENT CHILD	·
NET LOSS					☐ 500 TO 999	1,000 TO 4,999
Fidelity Gov't Money		<u> </u>	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
SHARES OF MUTUAL FUND	L					
HELD OR ACQUIRED BY		MUTUAL FUND		ſ	NAME	
MUTUAL FUND		MUTUAL FUND	Fidelity Gov't Money	ı	NAME	
LESS THAN \$5,000		SHARES OF MUTUAL FUND)
Vanguard 500 Index Fund SHARES OF MUTUAL FUND HELD OR ACQUIRED BY FILER X SPOUSE DEPENDENT CHILD NUMBER OF SHARES OF MUTUAL FUND X LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 IF SOLD NET GAIN DESS THAN \$5,000 1 \$5,000 to 9,999 STO. 000 - \$24,999 1 \$25,000 - OP MORE		SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER X LESS THAN 100	X SPOUSE 100 TO 499	DEPENDENT CHILD	
HELD OR ACQUIRED BY FILER X SPOUSE DEPENDENT CHILD		SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN	FILER X LESS THAN 100 5,000 to 9,999	X SPOUSE 100 TO 499 10,000 OR MORE	DEPENDENT CHILD	1,000 TO 4,999
MUTUAL FUND X LESS THAN 100		SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	FILER X LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000	X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999
H 10 000 - \$24 000 - \$25 0		SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND	FILER X LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Vanguard 500 Index F	X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
		SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER X LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Vanguard 500 Index F FILER X LESS THAN 100 ESS THAN 100	X SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999 und X SPOUSE ☐ 100 TO 499 ☐ 100 TO 499	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

MUTUAL FUNDS PART 4 If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. MUTUAL FUND NAME NYSaves Aggressive Growth Portfolio 529 College Savings Plan SHARES OF MUTUAL FUND X DEPENDENT CHILD 1 HELD OR ACQUIRED BY FILER SPOUSE NUMBER OF SHARES OF MUTUAL FUND LESS THAN 100 X 100 TO 499 500 TO 999 1,000 TO 4,999 5,000 to 9,999 10,000 OR MORE 4 IF SOLD NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NET LOSS

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

INSTRUCTION GUIDE.				
When reporting information about which the child is listed on the Co	a dependent child's activity ver Sheet.	, indicate the child about w	hom you are reporting by p	roviding the number under
SOURCE OF INCOME Publicly held corporation	Rental Income ADDRESS / 1204 W. Levee St		.ND ADDRESS #; CITY; STATE	; ZIP CODE
	Brownsville, TX 7852	0		
2 RECEIVED BY	FILER	X SPOUSE	DEPENDENT CHIL	D
3 AMOUNT	\$500 - \$4,999	X \$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE

PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Rocket Mortgage			
2 LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILE)
3 GUARANTOR	NONE			
4 AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	BMW USA			
LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILE	D
GUARANTOR	BMW USA			
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	X \$10,000 - \$24,999	\$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Ally Auto Financial			
LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILE	D
GUARANTOR	NONE			
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Lightstream, A Divisi	ion of SunTrust Bank		
LIABILITY OF	X FILER	X SPOUSE	DEPENDENT CHILE	D
GUARANTOR	NONE			
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE

INTERESTS IN REAL PROPERTY

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

which the child is listed on the Cover Sheet.	
1 HELD OR ACQUIRED BY X FILER SPOUSE	DEPENDENT CHILD
2 STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS STREET ADDRESS, INCLUDING	CITY, COUNTY, AND STATE
3 DESCRIPTION NUMBER OF LOTS OR ACRES AND NA 3.00000 lots Cameron County	AME OF COUNTY WHERE LOCATED
4 NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST)	
5 IF SOLD	\$10,000 - \$24,999 \$25,000OR MORE
HELD OR ACQUIRED BY X FILER SPOUSE	DEPENDENT CHILD
STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS X FILER SPOUSE STREET ADDRESS, INCLUDING	<u> </u>
STREET ADDRESS STREET ADDRESS, INCLUDING NOT AVAILABLE CHECK IF FILER'S X FILER SPOUSE STREET ADDRESS, INCLUDING	CITY, COUNTY, AND STATE
STREET ADDRESS STREET ADDRESS, INCLUDING NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION NUMBER OF LOTS OR ACRES AND NA LOTS X FILER SPOUSE NUMBER OF LOTS OR ACRES AND NA 2.00000 lots	CITY, COUNTY, AND STATE

INTERESTS IN REAL PROPERTY

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

HELD OR ACQUIRED BY			
NOT AVAILABLE CHECK IF FILERS Brownsville, TX 78520	1 HELD OR ACQUIRED BY	X FILER SPOUSE DEPENDENT CHILD	
I.00000 lots Cameron A NAMES OF PERSONS RETAINING AN INTEREST ONT APPLICABLE (SESVERED MINERAL INTEREST) Fletcher Dashiel Chaney LLC Firsold Not Applicable Common Number of Lots or Acres and Name of Country Where Located 1.00000 lots Cameron NAMES OF PERSONS RETAINING AN INTEREST Not Applicable CESCERED MINERAL INTEREST) NOT APPLICABLE CESCERED MINERAL INTEREST) FSOLD NET GAIN LESS THAN \$5,000 S5,000 - \$9,999 \$10,000 - \$24,999 \$25,000 - OR MORE	☐ NOT AVAILABLE ☐ CHECK IF FILER'S	1324 E. 8th St	ATE
RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL NITEREST) NET GAIN NET LOSS LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000-OR MORE HELD OR ACQUIRED BY FILER SPOUSE DEPENDENT CHILD	X LOTS	1.00000 lots	LOCATED
HELD OR ACQUIRED BY FILER X SPOUSE DEPENDENT CHILD	RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL	Fletcher Dashiel Chaney LLC	
STREET ADDRESS STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 1204 W. Levee St CHECK IF FILER'S HOME ADDRESS Brownsville, TX 78520 DESCRIPTION NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Cameron NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST) IF SOLD NET GAIN NET GAIN IF SOLD NET GAIN NET GAIN NET GAIN STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 1204 W. Levee St 1204 W. Levee	I NET GAIN	LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999	\$25,000OR MORE
NOT AVAILABLE CHECK IF FILER'S Brownsville, TX 78520			
	HELD OR ACQUIRED BY	FILER X SPOUSE DEPENDENT CHILD _	
RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST) IF SOLD NET GAIN LESS THAN \$5,000	STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STA	ATE
☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE	STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION X LOTS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STA 1204 W. Levee St Brownsville, TX 78520 NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE 1.00000 lots	
	STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION X LOTS ACRES NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STA 1204 W. Levee St Brownsville, TX 78520 NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE 1.00000 lots	

INTEREST IN BUSINESS ENTITIES

PART 7B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

	er Sheet.
1 HELD OR ACQUIRED BY	X FILER SPOUSE DEPENDENT CHILD
2 DESCRIPTION	NAME AND ADDRESS (Check if Filer's Home Address) Law Offices of Alejandro Dominguez
3 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE
HELD OR ACQUIRED BY	X FILER SPOUSE DEPENDENT CHILD
DESCRIPTION	NAME AND ADDRESS X (Check if Filer's Home Address) Fletcher Dashiel Chaney LLC 40 Sunset Dr Brownsville, TX 78520
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE
HELD OR ACQUIRED BY	
TILLE ON ACQUINED BY	FILER X SPOUSE DEPENDENT CHILD
DESCRIPTION	FILER X SPOUSE DEPENDENT CHILD NAME AND ADDRESS X (Check if Filer's Home Address) Fletcher Dashiel Chaney LLC
	NAME AND ADDRESS X (Check if Filer's Home Address)

OWNERSHIP OF BUSINESS ASSOCIATIONS

PART 11A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 5 percent or more of the outstanding ownership. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which

	the child is listed on the Cover S	Sheet.
1	BUSINESS ASSOCIATION	NAME AND ADDRESS
		X (Check If Filer's Home Address)
		Fletcher Dashiel Chaney LLC
Ļ	PERCENTION	
2	DESCRIPTION	
l		
3	BUSINESS TYPE	Corporation Limited Partnership Profesional Association
l		Firm Limited Liability Partnership Joint Venture
l		
		Partnership Professional Corporation X Other
4	HELD, ACQUIRED,	
l	OR SOLD BY	X FILER X SPOUSE DEPENDENT CHILD
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ASSETS OF BUSINESS ASSOCIATIONS

PART 11B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

	When reporting information about the child is listed on the Cover S	ut a dependent child's activity, indicate the child about whom you are reporting by providing the number under which theet.
1	BUSINESS ASSOCIATION	NAME AND ADDRESS X (Check If Filer's Home Address) Fletcher Dashiel Chaney LLC
2	BUSINESS TYPE	Other Business Association
3	HELD, ACQUIRED, OR SOLD BY	X FILER X SPOUSE DEPENDENT CHILD
4	ASSETS	DESCRIPTION CATEGORY 1604 E. 7th St., Brownsville, TX 78520; Vacant lot at 1324 E. 8th St., Brownsville, TX 78520 Sto,000 - \$24,999 X \$25,000 OR MORE
l		

LIABILITIES OF BUSINESS ASSOCIATIONS

PART 11C

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

	When reporting information abo the child is listed on the Cover S	a dependent child's activity, indicate the child about whom you are reporting by providing the number under which eet.
1	BUSINESS ASSOCIATION	NAME AND ADDRESS X (Check If Filer's Home Address) Fletcher Dashiel Chaney LLC
2	BUSINESS TYPE	Other Business Association
3	HELD, ACQUIRED, OR SOLD BY	X FILER X SPOUSE DEPENDENT CHILD
4	LIABILITIES	DESCRIPTION CATEGORY Mortgage on 1604 E. 7th St., Brownsville, TX 7820 to Lone Star National Bank LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$ \$25,000OR MORE

BOARDS AND EXECUTIVE POSITIONS

PART 12

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

the child is listed on the Cover Sheet.								
1 ORGANIZATION	CASA of Cameron and Willacy Counties (non-profit)							
2 POSITION HELD	Board Member							
3 POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD					
ORGANIZATION	Los Diez Education Foundation (non-profit)							
POSITION HELD	President							
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	_				

PERSONAL FINANCIAL STATEMENT

PARTS MARKED "NOT APPLICABLE" BY FILER

FORM PFS
COVER SHEET
PAGE 2

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. If you place a check in a box, do NOT include pages for that Part in the report.

6	PAR	RTS NOT APPLICABLE TO FILER					
		N/A Part 1A - Sources of Occupational Income					
	Х	N/A Part 1B - Retainers					
		N/A Part 2 - Stock					
		N/A Part 3 - Bonds, Notes & Other Commercial Paper					
		N/A Part 4 - Mutual Funds					
		N/A Part 5 - Income from Interest, Dividends, Royalties & Rents					
		N/A Part 6 - Personal Notes and Lease Agreements					
		N/A Part 7A - Interests in Real Property					
		N/A Part 7B - Interests in Business Entities					
	X	N/A Part 8 - Gifts					
	X	N/A Part 9 - Trust Income					
	X	N/A Part 10A - Blind Trusts					
	Χ	N/A Part 10B - Trustee Statement					
		N/A Part 11A - Business Associations					
		N/A Part 11B - Assets of Business Associations					
		N/A Part 11C - Liabilities of Business Associations					
		N/A Part 12 - Boards and Executive Positions					
	Χ	N/A Part 13 - Expenses Accepted Under Honorarium Exception					
	Χ	N/A Part 14 - Interest in Business in Common with Lobbyist					
	Χ	N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer					
	Χ	N/A Part 16 - Representation by Legislator Before State Agency					
	Χ	N/A Part 17 - Benefits Derived from Functions Honoring Public Servant					
	Χ	N/A Part 18 - Legislative Continuances					
	Χ	N/A Part 19 - Contracts with Governmental Entity					
	Χ	N/A Part 20 - Bond Counsel Services Provided by a Legislator					

he law requires the personal finan	cial statement to be verific	ed. Without proper verification, the	statement is not considered	filed			
	ne law requires the personal financial statement to be verified. Without proper verification, the statement is not considered filed. The verification page on a personal statement filed electronically with the Texas Ethics Commission must have the electronic signature of the dividual required to file the personal financial statement.						
he verification page on a personal the individual required to file the erson authorized by law to admini	personal financial stateme	with an authority other than the Texent as wells as the signature and sist.	cas Ethics Commission must camp or seal of office of a no	have the signatur tary public or othe			
		l swear, or affirm, under pena covers calendar year ending					
		and includes all information r 572 of the Government Code		e under chapter			
		Mr. Alejandro Dominguez					
		Signature of Filer					
AFFIX NOTARY STAMP / SEAL A	ABOVE						
		tness my hand and seal of office.	, this the	day			
, 20	, to corary writers, w	and soar or office.					
		name of officer administering oath	Title of officer a				